								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 Ley1-25, 923												923	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								ALL E	NTITY	OR	OTHER		
TOTAL CLAIMS			75				F	ATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BA	SIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			75 minus 20=		• 55		55>	C\$ 9=	145	OR	X\$18=		
INDEPENDENT CLAIMS			76 minus 3 =		BU		13	(42=	188	OR	X84=		
MU	LTIPLE DEPEN	IDENT CLAIM PI				1.	140=		OR	+280=			
* If the difference in column 1 is less than zero, enter "0" in column 2								OTAL	1033	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								MALL	ENTITY	OR	OTHER SMALL		
		CLAIMS		HIGH	EST	(Column 3)	֓֞֝֟֝֟ <u>֚</u>	JUINEL I	ADDI-		JIMPLE !	ADDI-	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	. A	ATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	. 14	Minus	- /	5	• Z	×	\$ 9=		OR	X\$18=		
	Independent	<u>* /.</u>	Minus .	tate .	<u>/</u>	-	×	42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=.		OR	+280=		
•							<u> </u>	TOTAL			TOTAL		
		(Column 1)		(Colur	na 2)	(Column 3)	ADD	IT. FEE			ADDIT. FEE		
AMENDMENT B	•	CLAIMS		HIGH	EST				ADDI-	Ĺ		ADDI-	
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	R	ATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	**		•	×	\$ 9=		OR	X\$18=		
	Independent FIRST PRESE	NTATION OF MIL	Minus	ENDENT	CLAIM	<u> </u>	х	42=		OR	X84=		
								40=		OR	+280=		
	TOTAL ADOIT, FEE									OR	TOTAL LODIT, FEE		
		(Column 1)		(Colum		(Column 3)	1					1	
AMENDMENT C		CLAIMS REMAINING AFTER		HIGH NUM PREVIO	BER	PRESENT EXTRA	R	ATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
	Total	AMENDMENT	Minus	PAID	FOR		H	-0-	FEE		V\$10-	FEE	
	Independent	• .	Minus	***		<u>.</u>	-	9=		OR	X\$18=		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						×	42=		OR	X84=		
								40=		ОЯ	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											TOTAL DDIT. FEE		
***	if the "Highest Num The "Highest Num	mber Previously Pa ber Previously Pal	aid For IN THI 1 For (Total or	SPACE II	a less than ant) is the	n 3, enter "3." highest numbe			propriate box				
								47-4	and Office Mil				

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